Registration Form

ERGONOMICS: TRAIN-THE-TRAINER REFRESHER
May 6th, 2009
(9:00 a.m. to 12:00 p.m.)
North Dakota Heritage Center
State Capitol Ground
Bismarck, ND

The Risk Management Division of OMB and Workforce Safety & Insurance are once again partnering to present an Ergonomics Training Opportunity that will assist State Agencies in developing an internally driven program to address unnecessary musculoskeletal disorders and repetitive stress injuries in the workplace. This train-the-trainer program will give trainees information needed to evaluate, design, or modify workstations, equipment, and work methods in an office setting. Videotapes of a variety of office workplaces will be used to enhance learning. Upon completing the training, the attendees will have the tools necessary to conduct training sessions for their frontline supervisors to help them understand and address ergonomic issues in their designated work sites as well as provide frontline supervisors with the necessary information to conduct awareness training for the employees they supervise.

The course will enable participants to:

328-7585 by April 15th.

- Understand ergonomic concepts and basic biomechanics principals
- Understand the causes of Musculoskeletal Disorders
- Use ergonomic assessment tools and conduct ergonomic assessments
- Develop training tools to assist in supervisor training
- Recognize potential problems in the workplace and recommend solutions
- ▶ Understand risk factors and work conditions that contribute to repetitive stress injuries
- ➡ Identify appropriate computer workstation design
- ▶ Identify and understand personal risk factors
- Understand basic elements of an ergonomic program

Please submit a separate copy of this form for each registrant attending from your agency.

There is a limit of 50 participants.

Name: ______ Employer_____

Phone: _____ Fax: _____ E-Mail: _____

Please check here if special accommodations are needed. We will contact you for further information.

Mail completed form to OMB Risk Management Division or Fax completed form to (701)